

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number
A9928503 (98222.1)

091775, 278

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE 07 GPO LINES		
TOTAL CLAIMS 07 GPO LINES	59	minus 20 = 39
INDEPENDENT CLAIMS 07 GPO LINES	6	minus 3 = 3
MULTIPLE DEPENDENT CLAIM PRESENT 07 GPO LINES		

* If the difference in column 1 is less than one, enter "0" in column 2.

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	RATE	FEES	FOR	RATE	FEES
	\$355		OR	\$	
	\$19	351	OR	\$	
	\$40	120	OR	\$	
	\$		OR	\$	
			OR	\$	
			OR	\$	
			TOTAL		
			OR		

TOTAL \$826

OR TOTAL

CLAIMS AS AMENDED - PART B

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total 07 GPO LINES	73	Minus	** 59	- 14
	Independent 07 GPO LINES	7	Minus	** 6	- 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 07 GPO LINES					

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	RATE	ADDI- TIONAL FEE	FOR	RATE	ADDI- TIONAL FEE
	\$9	126	OR	\$	
	\$40	40	OR	\$	
	\$		OR	\$	
			OR	\$	
			OR	\$	
			TOTAL		
			OR		

TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total 07 GPO LINES	39	Minus	** 23	-
	Independent 07 GPO LINES	1	Minus	** 7	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 07 GPO LINES					

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	RATE	ADDI- TIONAL FEE	FOR	RATE	ADDI- TIONAL FEE
	\$		OR	\$	
			OR	\$	
			OR	\$	
			OR	\$	
			OR	\$	
			TOTAL		
			OR		

TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total 07 GPO LINES	70	Minus	** 23	-
	Independent 07 GPO LINES	4	Minus	** 7	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 07 GPO LINES					

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

FOR	RATE	ADDI- TIONAL FEE	FOR	RATE	ADDI- TIONAL FEE
	\$		OR	\$	
			OR	\$	
			OR	\$	
			OR	\$	
			OR	\$	
			TOTAL		
			OR		

TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 1.

** If the "Highest Number Previously Paid For" in THIS SPACE is less than 70, enter "20".

*** If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Service Mark Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20591. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Patent Examination Fee Receipts, Washington, DC 20591.

10/26/05